LOBBYING EXPENDITURE REPORT COVERING JANUARY I THROUGH JUNE 30 DUE AUGUST 15 COVERING JULY I THROUGH DECEMBER 31 DUE FEBRUARY 15	Lobbyist's Registration Number FOR OFFICE USE ONLY Postmark Date: 1 - 16 - 0 1
Instructions	FRO
 Print in talk or type. Fill in Registration Number in spaces provided. Complete form and return to the Board of Ethics, \$401 United Plaza Blvd., Suite 200, Baton Rouge, LA 70809 (225) 922-1400. This form must be delivered or postmarked by the due date. This form may be faxed to (225) 922-1414. The original should be forwarde on the day of fax transmittal. 	1010163
I. Name Tew Sherry I Last First	MI
Business Address 909 Poydras Street, Suite 2300, No Street and No.	or Orleans, 1.A 70130 City State Zip
Mailing Address same	SECTION AND SECTION SEC
3. Business Phone (504) 569-7000 Area Code and Telephone Number	
4. Total of all expenditures made January 1 through June 30: \$ (Include expenditures from Schedules A and H)	<u> </u>
Total of all expenditures made July 1 through December 31: \$ (When Applicable) (include expenditures from Schedules A and B)	. 0-
6. Total of all expenditures made during calendar year: [1] inc 4 added with Line 5 should equal time 6) [2]	
7. Did you make an expenditure exceeding \$50 on one occasion for	r any one logislator:
From July 1 through June 30? Yes From July 1 through December 31? Yes	No □ NA 23 662
If the answer to either question in Number 7 above is YES, pleas	e complete Schedule A and attach.
Form now, sees divide (1) (1) (1) (1) (1) (1)	

LOBBYING EXPENDITURE REPORT

Form 500, 1649 Fasta

Lobbyist's Registration Number

8. Did you make expenditure	e evacadina	the sum of \$2	50 for new one les	alatam	
a. 17th you make expenditure	s exceeding	g DIC Sum Of \$2	50 for any one rep	gislator:	
From January 1 through Ju		☐ Yes	□ No		
From July 1 through Decer	nber 317	☐ Yes	E 1/0		NA
If the answer to either ques	stion in Nu	mber 8 above is	YES, please con	nplete S	chedule A and attach.
 Did you expend funds for a legislature, either house, an created by resolution of cit delegation thereof were in- 	ry standing her house,	committee, sel subcommittee o	ect committee, st of any committee,	alutory e	committee, committee
	☐ Yes		⊡′ No		
If the answer to Number 9	above is Y.	ES, please con	mlete Schedule B	and att	ach.
	CER	TIFICATION O	DE ACCURACY		
I hereby certify that the im-	formation c	ontained herein	is true and corre	ct to the	best of my knowledge,
information, and belief; t	hat all rep	ortable expend	litures have been	includ	ed herein; and that no
information required by th					
omitted.		0			
	ク	MANAS Signature of A	Jaw Tobyisi	34	
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